. IN THE UNITED STATES	PATENT AND TRADEMARK OFFICE	33.			
In re Patent Application of OIPE	Dkt. 13-110 C# M#				
MIERAU et al					
Allis / Lood Hill	ner: Savage, M.				
Filed: September 27, 200	ate: August 27, 2003	T			
Title: STATIC FILTRATION MEDIC VESSELS	T(C)	m			
	· · · · · · · · · · · · · · · · · · ·				
Commissioner for Patents	0 3 2003 1700	$\geq$			
P.O. Box 1450 Alexandria, VA 22313-1450	00 08	m			
,,		U			
Sir:	AMENDMENT/LETTER				
	fied application and includes an attachment which is hereby				
incorporated by reference and the signature below serv signature thereon.	es as the signature to the attachment in the absence of any otl	her			
	rm Attached				
Fees are attached as calculated below:	IIII Attached.				
Total effective claims after amendment 44 minu	s highest number	0.00			
previously paid for 44 (at least 20) = 0		0 00			
Independent claims after amendment 5 minu previously paid for 5 (at least 3) = 0	s highest number x \$ 84.00 \$	0.00			
If proper multiple dependent claims now added for first	ime, add \$280.00 (ignore improper) \$	0 00			
Petition is hereby made to extend the current due date paper and attachment(s) (\$110.00/1 month; \$410.00/2 mo		50 00			
Terminal disclaimer enclosed, add \$ 110.00	\$	0 00			
First/second submission after Final Rejection pursual Please enter the previously unentered, f	ant to 37 CFR 1.129(a) (\$750.00) \$	0 00			
Submission attached					
	Subtotal \$ 145	0.00			
If "small entity," then enter half (1/2) of subtotal and sub Applicant claims "small entity" status.	ract -\$ 72 Statement filed herewith	25.00			
Rule 56 Information Disclosure Statement Filing Fee (\$	80.00) \$	0 00			
Assignment Recording Fee (\$40.00)	\$	0 00			
Other:		0.00			
	TOTAL FEE ENCLOSED \$ 72	25.00			
The Commissioner is hereby authorized to charge any <u>deficiency</u> , or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A <u>duplicate</u> copy of this sheet is attached.					
	IXON & VANDERHYE P.C.				
Arlington, Virginia 22201-4714	y Atty: Michelle N. Lester, Reg. No. 32,33∱				
Telephone: (703) 816-4000 Facsimile: (703) 816-4100	(1/1/2/5(skd./				
	gnature: flather which				

Please type a plus sign (+) inside this pox

Under the Paperwork Reduction Act of 1995

INDICATION FORM

AUG 2 7 2003

PTO/SB/121 (10-00)
Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

persons are required to respond to a collection of information unless it displays a valid OMB control number.

CORRESPONDENCE ADDRESS

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Address to:

RECEIVED SEP 0 3 2003 TC 1700

		<del></del>			0 8 14			
Direct all corresp	ondence to:		Place	Customer				
$\boxtimes$	Customer Number:	23117	Num	oustomer iber Bar I Here →				
OR		Type Customer Numbe	er here					
Request for Customer Number (PTO/SB/125) submitted herewith.								
in the following listed application(s) or patent(s):								
Patent Nu (if appropr		Patent D Application Number (if appropri			U.S. Filing Date			
	09/96	53,636			September 27, 2001			
				(check on				
Typed or Printed Name	Mich	nelle N. Lester			Applicant or Patentee			
Signature ////////////////////////////////////		i 3	Assignee of record of the entire nterest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form					
Date Address of signer:	15			PTO/SB/96) Attorney or Agent of record				
					32,331 (Reg. No.)			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Assistant Commissioner of Patents, Box CN, Washington, DC 20231.

forms are submitted.

\*Total of